10:47:55 a.m. 06-06-2018	2	843 215 9566
Jun 07 18 10:39a		Frank Seeley

(Please type or print) Submitted by:

843-2	215-9566		p.2	
		276	188	
	SERVI	RE THE CE COMN CAROLI		
TRANSPO	RTATI	ON COVE	R SHEET	
DOCKET NUMBER:	2018	190	<u>- T</u>	
If this is your first time have a Docket Number, have filed with the Con and should be entered ab	The Comn unission be	dission will ass	ien one to von If v	ob.
Telephone:	843-	424-19	509	 -
Fax:	843	-215-9	1566	
Other:				_
Email: Frank nor supplements the fil- nomission of South Care	ng and ser	vice of plead	ings or other pape	ers est
check an that apply)	~~~ `` ~~		
Request for Name Change on Certificate				
		• •		

STATE OF SOUTH CAROLINA

(Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo

Application for a Class C Charter Certificate from AA Constal

Transportation of Sc, LLC

Address: 3887 Stillwood Drive

Request for Cancellation of Certificate

Request for Suspension

Request for Reinstatement

Telephone:

Fax:

Email: NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and's as required by law. This form is required for use by the Public Service Commission of South Carolina for be filled out completely.

NATURE OF ACTION (Check an that apply)				
Application - Class A/A Restricted	Request for Name Change on Certificate			
Application - Class C Taxi	Request to Amend Scope of Authority			
Application - Class C Charter	kequest to Amend Tariff (rate increase, etc.)			
Application - Class C Charter Bus	Dequest to Amond Passenger Limit			
Application - Class C Non-Emergency	Request			
Application - Class C Strettett Van	Exhibit			
Application - Class E Household Goods	Late-Filed Exhibit			
Application - Class E Hazardous Waste	Letter			
Application	Proposed Order			
Request for Extension to Comply with Order	Publisher's Affidavit			
Request for Order Granting Authority to Obtain a Certificate	Reservation Letter			
of Public Convenience and Necessity to be Rescinded	Response			
The Request for Concellation of Certificate	Return to Petition			

If you have any questions about this form, please contact the PUBLIC SERVICE COMMISSION at 803-896-5100.

Other:

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Frank Seeley

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 Executive Center Drive, Suite 100 Columbia, South Carolina 29210

Phone: (803) 896-5100 F

Fax: (803) 896-5199

APPLICATION FOR CERTIFICATE OF PUBLIC CONVENIENCE AND NECESSITY FOR OPERATION OF MOTOR VEHICLE CARRIER

OI EMATION OF MOTOR VEHICLE CARRIER
Date: 5/24/2018
CLASS C - CHARTER
Application is hereby made for a Certificate of Public Convenience and Necessity, in accordance with the provision of S.C. Code Ann., § 58-23-10, et seq. (1976), and amendments thereto.
1. AA Coastal Trunsportation of SC, LLC
Name under which business is to be conducted (corporation, partnership, or sole proprietorship, with or without trade name. 3827 Stillwood Dive, Myrtle Beach, SC 2958 Street Address of Applicant
Mailing Address of Applicant (if different from street address)
843-424-1509 843-215-9566
Phone Fax Fax Frankamy 20 hotmail.com Email Address
2. If the Applicant is an LLC or a corporation, a copy of the Certificate of Existence from the South Carolina Secretary of State and the Articles of Incorporation must be attached. (If incorporated outside of SC, attach South Carolina Secretary of State "Foreign Corporation" Certificate.)
3. Select Entity Type: (Check one)
 Individual Owner/Sole Proprietorship Partnership - List names and addresses of all person having an interest in the business.
Corporation - List names and addresses of two principal officers.
Amy Seeley - 3887 Still wood Drive, Myothe Beach, Sc 39588
Amy Seeley - 3887 Stillwood Drive, Myrtle Beach, Sc 29588 Edward Seeley - 3887 Stillwood Drive, Myrtle Breach, Sc 29588

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Applicant is financially able to furnish the services as specified in this application and submits the following statement of assets and liabilities.

Financial Statement

Applicant's assets and liabilities are as follows:

Assets:		<u>Liabilities:</u>		
Value of Real Estate	D	Mortgage/Loan on Real Estate	0	
Value of Motor Vehicles	\$40K	Loans Owed on Motor Vehicles	\$34 K	
Cash on Hand	0	Business/Other Loans Owed	Ø	
Cash in Bank	\$1050.00	Other Liabilities or Debts	٥	
Value of Other Assets and Equipment	0	Total Liabilities	\$34K	
Total Assets	\$40,050.00			

INSTRUCTIONS:

- 1. "Value of Real Estate" means the actual or estimated market value of any real property/buildings owned by the Company/Business Applying for a Certificate.
- "Mortgage/Loan on Real Estate" means the outstanding balance on any Mortgage, Equity Line or other Loan secured by the Real Estate listed in Item 1.
- 3. "Value of Motor Vehicles" means the actual or fair estimated value of any moving vans, trucks or other vehicles owned by the Company/Business Applying for a Certificate.
- 4. "Loans Owed on Motor Vehicles" means the outstanding balance on any loans or liens on the vehicles listed in Item 3.
- 5. "Cash on Hand" is the total of actual cash held by the Company/Business applying for a Certificate on the day this form is filled out.
- 6. "Business/Other Loans Owed" means the outstanding balance on any small business loan or other unsecured loan made by a person, bank or business to the Business/Company applying for a Certificate.
- 7. "Cash in Bank" means the current balance in checking accounts, savings accounts or the like in the name of the Company/Business applying for a Certificate. Do not include retirement accounts or personal bank account balances.
- 8. "Value of Other Assets and Equipment" should include the actual or estimated value of items such as office equipment (computers/furnishings), moving equipment (hand trucks/blankets/strapping), and trailers.
- "Other Liabilities or Debts" means specific amounts/balances which the Company/Business applying for a Certificate
 knows that it owes to other persons or companies; for example Franchise Fees. This does NOT include regular bills
 such as electricity bills, security system costs, insurance, salaries, etc.

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PROPOSED RATES AND CHARGES FOR SERVICE

Proposed Rates and Charges:

Requested Scope of Authority: Check all counties in which you are requesting permission to operate. You will only be allowed to operate in those counties checked below. You may request "Statewide" authority if you intend to operate in all counties in South Carolina.

Abbeville	Cherokee	Florence	Lee	Saluda
Aiken	Chester	Georgetown	Lexington	Spartanburg
Allendale	Chesterfield	Greenville	Marion	Sumter
Anderson	Clarendon	Greenwood	Marlboro	Union
Bamberg	Colleton	Hampton	McCormick	☐ Williamsburg
Barnweil	Darlington	Horry	Newberry	York
Beaufort	Dillon	Jasper	Oconee	
Berkeley	Dorchester	Kershaw	Orangeburg	Statewide
Calhoun	Edgefield	Lancaster	Pickens	
Charleston	Fairfield	Laurens	Richland	

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DESCRIPTION OF EQUIPMENT

You are not required to own a vehicle to file an application. However, prior to being issued a certificate by ORS, you will be required to have obtained a vehicle.

Maximum Number of Passengers Vehicle is Equipped to Carry: (The number of passengers a vehicle is equipped to carry is based on the number of <u>seatbelts</u> in the vehicle, including the driver's seatbelt.)

1-7 Passengers, including driver
8-15 Passengers, including driver

MAKE	YEAR & MODEL	VIN#	EMPTY WEIGHT
GMC	2016 Yukon XL	16K516KC26R246273	3,500
	I .		
	<u> </u>		
•			

INSURANCE QUOTE

This form MUST BE COMPLETED.

07 18 10:39a	Frank Seeley	,		843-215-9566	p.7
		INSURAN	ICE Q	UOTE	
his form MUST B he insurance quote surance policies n urchase insurance	E COMPLETE: e must be comple nay be required. I until your applica	D.te, listing current insurance pTo not provide a copy of insurance pation has been approved and	oremium orance po an order	is. At the discretion of the Commiss olicies unless requested. You will r has been issued by the PSC. THIS	sion, a copy of current not be required to IS ONLY A QUOTE.
The following in	nsurance quote i	s for:			
		Any Sceled	1 AA	Coastal Transportation	on of SC
			• •		
<u> 3887</u>	Stillwas	d Drie Myrtie G Address of	Bead	1, SC 29588	
		Address of	Applic	cant	
Amount of Pre	mium:		Limi	ts Quoted: (See Below)	
Liability Insura	nce \$3,	500.60	Limit	s = 25,000 50,000 20	s, ooo
The above quot	ted premium is t	for a term of 12	month	ns.	
Minimum Lim	its - Intrastate	Only:			
	Passengers*	\$ 25,000/50,000/25,000		* Passengers = Number of seath including the dr	
8-15	Passengers*	\$ 25,000/100,000/25,00	V		
	4	Ssured Partner Name of Insur	285		
· · · · · · · · · · · · · · · · · · ·	_ 	Name of Insur	ance Co	ompany	C
11919	Dlaza To	rive Murveile Ta	Jrt. S	ic 29576	
	1.464	Home Office Add	dress of	Company	

I, the Applicant, am familiar with the Commission's Rules and Regulations relating to insurance requirements and the above quote meets the minimum insurance limits prescribed. The insurance company making this quote is authorized by the South Carolina Department of Insurance to do business in South Carolina.

NOTICE:

If you wish to self-insure your motor vehicles for liability and property damage, you must comply with S.C. Code Ann. Sections 56-9-60 and 58-23-910. For more information, contact the Department of Motor Vehicles at (803) 896-8457 or (803) 896-9903.

If you wish to apply as a self-insured for worker's compensation coverage in South Carolina you may do so with the South Carolina Worker's Compensation Commission (WCC) provided that you will be able to: 1) post a surety bond or letter-of-credit with the WCC for a minimum of \$500,000, 2) agree to pay a yearly self-insurance tax, and 3) agree to pay an annual assessment to the South Carolina Second Injury Fund. For more information, contact the WCC Self-Insurance Division at (803) 737-5712 or on the web at www.wcc.state.sc.us/self-insurance.

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therewith?

Yes

Frank Seeley

Exhibit Fit, Willing, and Able (FWA)

	Am	Sected AA	Coastal Transpor	lation of SC
•		Name of	Appticant 1	
1.	Are there currently any out O Yes If Yes, list judgements her	⊘ No	the Applicant?	
	ir 103, iist jaugoments not			
2.	Is Applicant familiar with a carrier operations in South statutes and regulations?	all statutes and regulations, i South Carolina, and does A	ncluding safety regulation	ons and governing for-hire mo
	⊘ Yes	○ No		

3. Is Applicant aware of the Commission's insurance requirements and the insurance premium costs associated

O No

⊘Yes

0

No

843-215-9566

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Exhibit on Driver Qualifications

l.	Applicant understands that all drivers must be a minimum of 18 years of age.		
	⊘ Yes	O No	
2.	and such record fro		the driver's three (3) year driving record issued by the SC DMV which the driver is or has been domiciled for such period must e.
	€ Yes	○ No	
3.	Applicant understands that a criminal history background check from the state where the driver currently liver must be maintained in the Applicant's business office.		
	€ Yes	O No	
4.	Applicant understar their possession wh state of residence o	nen operating a charter vehi	g a vehicle under a Class C Certificate must have in cle, a valid driver's license issued by the SC DMV or the currer
	Ø Yes	○ No	
5.	vehicles to drivers	who are registered, or requi	ate holders are prohibited from employing or leasing ired to be registered, as sex offenders with the South Carolina hal registry of sex offenders.

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Frank Seeley

843-215-9566

PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA 101 EXECUTIVE CENTER DRIVE, SUITE 100 COLUMBIA, SOUTH CAROLINA 29210

Applicant is familiar with the provision of S.C. Code Ann. §58-23-10, et seq.(1976), and amendments thereto, and R.103-100 through R.103-241 of the Commission's Rules and Regulations for Motor Carriers (S.C. Code Ann. Regs., 1976), and R.38:400 through R.38-503 of the Department of Public Safety's Rules and Regulations for Motor Carriers (Volume 2, S.C. Code Ann., 1976) and amendments thereto, and hereby promises compliance therewith.

S.C. Code Ann. Section 58-3-250 states, in part, that every final order of the Commission must be served by electronic service, registered or certified mail, upon the parties to the proceeding or their attorneys.

Please check the applicable box:

The Applicant AGREES to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System. The Applicant authorizes the Commission to serve its orders by using the email address as it appears on page one of this Application. To sign up for eService notifications, please visit www.psc.sc. gov to create a My DMS account.

The Applicant DOES NOT AGREE to receive future Commission orders related to the Applicant's authority in South Carolina through the Commission's eService System.

The Applicant for the Certificate of Public Convenience and Necessity as set forth in the foregoing, swear or affirm that all statements contained in the above application are true and correct.

STATE OF SOUTH CAROLINA

SWORN TO BEFORE ME

day of June

Notary Public

Commission Expires 12-11-2023

Matt Bums **NOTARY PUBLIC** STATE OF SOUTH CAROLINA AY COMMISSION EXPIRES 12/11/2023 05:01:14 p.m. 06-07-2018

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Frank Seeley

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South Carolina Secretary of State Mark Hammond

Business Entities Online

File, Search, and Retrieve Documents Electronically

AA Coastal Transportation of SC, LLC

Corporate Information

Entity Type: Limited Liability Company

Status: Good Standing

Domestic/Foreign: Domestic

Incorporated State: South Carolina

Important Dates

Effective Date: 05/31/2018

Expiration Date: N/A

Term End Date: N/A

Dissolved Date: N/A

Registered Agent

Agent: Amy Seeley

Address: 3887 Stillwood Drive

Myrtle Beach, South Carolina 29588

Official Documents On File

Filing Type	Filing Date
Articles of Organization	05/31/2018

For filing questions please contact us at 803-734-2158

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